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**\*BIBDATASHEET\***

CONFIRMATION NO. 5536

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SERIAL NUMBER 10/074,372	FILING DATE 02/11/2002  RULE	CLASS 606	GROUP ART UNIT 3731	ATTORNEY DOCKET NO. 1671-0191/DEP-612
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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*  
 - NONE -

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
 - NONE -

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 03/11/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>Swelle</u> <u>SW</u> Examiner's Signature Initials	STATE OR COUNTRY IN	SHEETS DRAWING 13	TOTAL CLAIMS 34	INDEPENDENT CLAIMS 3
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ADDRESS

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TITLE

Cutting device for use in a medical procedure

FILING FEE  RECEIVED 1810	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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